

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 5px 0;">(to be used for all correspondence after initial filing)</p>	Application Number	10/812,716-Conf. #5359
	Filing Date	March 30, 2004
	First Named Inventor	Choong-Chin Liew
	Art Unit	1634
	Examiner Name	J. C. Switzer
	Attorney Docket Number	2055E(204231)
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please Identify below):
<div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; margin-bottom: 5px;"></div> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature	/Gabriel J. McCool/		
Printed name	Gabriel J. McCool		
Date	July 25, 2008	Reg. No.	58,423

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: July 25, 2008	Electronic Signature for Gabriel J. McCool: /Gabriel J. McCool/

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 2055E(204231)	
Application No. 10/812,716-Conf. #5359	Filing Date March 30, 2004	Examiner J. C. Switzer	Art Unit 1634	

Applicant(s): Choong-Chin Liew

Invention: **METHOD FOR THE DETECTION OF TYPE II DIABETES RELATED GENE TRANSCRIPTS IN BLOOD**

**TO THE COMMISSIONER FOR PATENTS**

Transmitted herewith is an amendment in the above-identified application.  
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
<b>Total Claims</b>	- 20	=		x
<b>Independent Claims</b>	- 3	=		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
<b>Other fee (please specify):</b> Extension for response within third month				525.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				525.00

☐ Large Entity
 ☒ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 04-1105 in the amount of \$ 525.00.  
 A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-1105 as described below. A duplicate copy of this sheet is enclosed.
 

☒ Credit any overpayment.
   
☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

/Gabriel J. McCool/
Dated: July 25, 2008

Gabriel J. McCool  
 Attorney/Agent Reg. No.: 58,423

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 Boston, Massachusetts 02205  
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